

10/522,505

CLAIMS ONLY						Application Number		Filing Date				
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1					1		51					
2							52					
3						2	53					
4						1	54					
5						1	55					
6						1	56					
7						1	57					
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42						1	92					
43						1	93					
44						1	94					
45						1	95					
46						1	96					
47						1	97					
48						1	98					
49						1	99					
50						1	100					
Total Indep						1	Total Indep					
Total Depend						1	Total Depend					
Total Claims						1	Total Claims					